PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

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## UTILITY **PATENT APPLICATION TRANSMITTAL**

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Attorney Docket No.

(Only for new nonprovision	al applications under 37 CFR 1.53(b))	Express Mail Label No. 🔼 🕜 🔾 🗘 🗀 🗀	? o :
APPLICATION ELEMENTS		Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	63 63
1. Fee Transmittal For (Submit an original and a construction of the See 37 CFR 1.27.  3. Specification (preferred arrangement - Descriptive title - Cross Reference - Statement Regalance - Reference to see	[Total Pages   String   ]	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper	09/8417
- Background of	he Invention	c. Statements verifying identity of above copies	
- Detailed Descri - Claim(s) - Abstract of the Drawing(s) (35 U	n of the Drawings (if filed) offon  Disclosure  S.C. 113) [ Total Sheets ]	ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s))  10. 37 CFR 3.73(b) Statement Power of Attorney  11. English Translation Document (if applicable)  12. Information Disclosure Copies of IDS Statement (IDS)/IDTO 1449  12. Statement (IDS)/IDTO 1449	
5. Oath or Declaration  a. Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuationIdivisional with Box 18 completed)  i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		Statement (IDS)/PTO-1449 Preliminary Amendment Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15. Certified Copy of Priority Document(s) (if foreign priority is claimed)  16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	+
6. Application Data Sheet. See 37 CFR 1.76		17. Other:	
or in an Application Data She Continuation Prior application information: For CONTINUATION OR DIVISI	Divisional Continuation in part (CIP)  Examiner	prior application, from which an oath or declaration is supplied under tion or divisional application and is hereby incorporated by reference. antly omitted from the submitted application parts.	÷
	19. CORRESPONDE		1
Customer Number or Bar Co	ode Label (Insert Customer No. or Attach bar i	ord: (abe) here)	
Name		-	_
Address	26830		]
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Country	// U.S. Tele	phone 727 781 0089 Fax 727 785	BH35
Name (Print/Type)	Richard Soole Willson.	Registration No. (Attorneyl Agent) 22080	
Signature //	Mal Brete HA	Date ZHADRI 2001	

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PTO/SB/17 (11-00)

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## **FEE TRANSMITTAL** for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

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Complete if Known				
Application Number	Here	ewith		
Filing Date	(1)			
First Named Inventor	Wi	I SON,		
Examiner Name	MnJe	HeryFredman		
Group Art Unit	165	5 –		
Attorney Docket No.	000	amus		

METHOD OF PAYMENT	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES			
indicated fees and credit any overpayments to:	Large Small			
Account Number 20 – 0336	Entity Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	Fee Paid		
Deposit Account VS20 200 000 000 000 000 000	105 130 205 65 Surcharge - late filing fee or oath			
Account Technology Centing Co.				
Charge Any Additional Fee Required	127 50 227 25 Surcharge - late provisional filing fee or cover sheet			
Under 37 CFR 1.16 and 1.17	139 130 139 130 Non-English specification			
Applicant claims small entity status. See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination			
2. Payment Enclosed: TLC CHK 1071 Bot A	112 920* 112 920* Requesting publication of SIR prior to Examiner action			
Check Credit card Money Other	113 1,840* 113 1,840* Requesting publication of SIR after			
FEE CALCULATION	Examiner action			
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month			
Large Entity Small Entity	116 390 216 195 Extension for reply within second month			
Fee Fee Fee Fee Description	117 890 217 445 Extension for reply within third month			
Code (\$) Code (\$) Fee Paid  101 710 201 (355) Utility filling fee	118 1,390 218 695 Extension for reply within fourth month			
106 320 206 160 Design filing fee	128 1,890 228 945 Extension for reply within fifth month			
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal			
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal			
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing			
•	138 1,510 138 1,510 Petition to institute a public use proceeding			
SUBTOTAL (1) (\$) 355†	140 110 240 55 Petition to revive - unavoidable			
2. EXTRA CLAIM FEES Fee from	141 1,240 241 620 Petition to revive - unintentional			
Extra Claims below Fee Paid	_			
Total Claims ZO -20** = 0 X = 0	143 440 243 220 Design issue fee			
Independent Claims x ZSO = ZSO	144 600 244 300 Plant issue fee			
Multiple Dependent ' C = C	122 130 122 130 Petitions to the Commissioner			
Laura Baltina III da	123 50 123 50 Processing fee under 37 CFR 1.17(q)			
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt			
Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)			
103 18 203 9 Claims in excess of 20 102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection			
104 270 204 135 Multiple dependent claim, if not paid	(37 ČFR § 1.129(a))			
109 80 209 40 ** Reissue independent claims over original patent	149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))			
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)			
and over onginal patent	169 900 169 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$) 635	Other fee (specify)			
	*Reduced by Basic Eiling Fee Paid SUBTOTAL (3) (\$)	0		
"or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3)			

SUBMITTED BY		111	Complete (if applicable)
Name (PnntiType)	Rixbard		Registration No. (208/) Telephone 727.78 , 008
Signature C	Maril	(19010 h	HIMONA, Date ZHADOZOO

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